Louis LaTorre, Senior Director Social Services/dra

BOARD OF COUNTY COMMISSIONERS

AGENDA ITEM SUMMARY

MEETING DATE:	6-18-2003	•	DIVISION:	COMMUNITY SERVICES					
BULK ITEM:	YES _X_	NO	DEPARTME	ENT: SOCIAL SERVICES					
Contract between th	e State of Flori ners (Monroe C 30, 2004.	da, Department County Social Se	of Children & Families ervices/In-Home Service	Care for Disabled Adults (CCDA) and the Monroe County Board of es Program) for Fiscal Year July 1,					
ITEM BACKGROUND: The approval of the CCDA Contract will enable Monroe County In-Home Services to continue providing in home services to the Disabled Adults of Monroe County under the Community Care for Disabled Adults (CCDA) program.									
PREVIOUS RELE	VANT BOCC	ACTION:	February 19 & 20, 20	03					
CONTRACT/AGE	REEMENT CH	HANGES:	N/A						
STAFF RECOMM	ENDATION:	Approval		**************************************					
TOTAL COST: \$9 COST TO COUNT	•)		BUDGETED: YES_X_NO SOURCE OF FUNDS: CCDA Contract for Fiscal year 7/2003 thru 6/2004					
REVENUE PROD	UCING: YES	NO_X	AMT.PER MONTH_	YEAR					
APPROVED BY:			Purchasing X RISK	MANAGEMENT <u>X</u>					
DIVIDION DIREC			AMES MALLOCH						
DOCUMENTATIO	ON: INC	LUDED	TO FOLLOW_X	NOT REQUIRED					
DISPOSITION:			AGENDA IT	TEM#: 34					
D: 4 1/02				•					

MONROE COUNTY BOARD OF COUNTY COMMISSIONERS

CONTRACT SUMMARY										
Contract with: State of I Children & Families	Florida/Department of	Contract:								
			ective Date: July 1, 2003							
Expiration Date: June 30, 2004 Contract Purpose/Description: Approval of the Renewal of the Community Care for Disabled Adults (CCDA) Contract between the Alliance for Aging, Inc. and the Monroe County Board of County Commissioners (Monroe										
County Social Services/In-Home Services Program) for Fiscal year July 1, 2003 through June 30, 2004.										
Contract Manager: Deloris Simpson			4589 Social Services/Stop 1							
	(Name)		(Ext.) (Department/Stop #)		pp #)					
For BOCC meeting on 6/18/2003			Agenda Deadline	enda Deadline: 6/3/2003						
CONTRACT COSTS										
Total Dollar Value of C	•	0-4	Current Year Portion: \$							
Budgeted? Yes X No Account Codes:										
Grant: \$ 91,713.00 (Fiscal Year)										
7.1.10		DITIONAL C								
Estimated Ongoing Costs: \$/yr For: (Not included in dollar value above) (eg. Maintenance, utilities, janitorial, salaries, etc)										
(og. manas, jamena, ja										
	CO	NTRACT RE	VIEW							
		Date Out								
		anges eded	Reviewer							
Division Director	Yes □	No □								
Risk Management	Yes 🗆	No □								
O.M.B./Purchasing	Yes 🗆	No □		 .						
County Attorney	Yes 🗆	No □		····						
Comments:										
				· · · · · · · · · · · · · · · · · · ·						

OMB Form Revised 2/27/01 MCP #2